Submit 3 Copies To Appropriate District Office	State of	*		Form C-103		
District I	Energy, Minerals and Natural Resources			Revised March 25, 1999 WELL API NO.		
1625 N. French Dr., Hobbs, NM 88240 District II OH. CONICED VA TION DIVISION				WELL API NO. 30-025-34981		
11 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION				5. Indicate Type	of Lease	
District III 2040 South Pacheco 1000 Rio Brazos Rd., Aztec, NM 87410				STATE		
District IV 2040 South Pacheco, Santa Fe, NM 87505			/505	6. State Oil & C	Gas Lease No.	
	ICES AND DEDODTS OF	NWETT	1	B1606-0	ow I Init A consequent	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				7. Lease Name or Unit Agreement Name:		
DIFFERENT RESERVOIR. USE "APPLIC	CATION FOR PERMIT" (FOR)	M C-101) F	OR SUCH	1,4,10		
PROPOSALS.) 1. Type of Well:				Bimini State 13		
Oil Well X Gas Well	☐ Other			_		
2. Name of Operator			·	8. Well No. 1		
Southwestern Energy Production Company				0 D 1	¥\$7*1 1	
3. Address of Operator 2350 N. Sam Houston Parkway East, Suite 300 – Houston, TX 77032				8. Pool name or Wildcat Vacuum Abo NE		
4. Well Location				Vacuum Abo ME		
Unit Letter E :	2310 feet from the	N li	ne and <u>990</u> 1	feet from the <u>W</u>	line	
Section 13	Township 17	7S Rar	ige 35E	NMPM Lea	County	
	10. Elevation (Show w					
11 Charles	3921 GR	lianta NI		21 1 21		
	Appropriate Box to Inc	ncate in		SEQUENT RE		
			REMEDIAL WOR		ALTERING CASING	aП
			TIEMEDINE WOTH	`	ALI LI III O OAGING	. —
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING OPNS. ABANDONMENT			
PULL OR ALTER CASING			CASING TEST AN	ADANDONMENT		
	COMPLETION		CEMENT JOB			
OTHER:			OTHER:			
12. Describe proposed or complete						
of starting any proposed work) or recompilation.	. SEE RULE 1103. For I	Multiple C	Completions: Attach	wellbore diagram	of proposed completion	on
or recompilation.						
3/27/00 Set 20" conductor @ 40'						
3/28/00 Spud @ 3:30 pm on 3/28/	/00. Drill to 400'. Run	9 its 13 3/	8" I-55, 54 5# casin	o to 400' Cement	lead w/220 sv 15:85	
POZ C w/2% gel, 2% CACL, 0.25	pps celoflake. Tail w/200	sx "C", 2	2% CACL. Circ 73	sacks to reserve. V	VOC 18 hrs.	
I hereby certify that the information	above is true and comple	te to the h	est of my knowledg	e and belief		—
lhll. Y						
SIGNATURE Cothy fac	ulh	TITLE	Drilling Technician	DATE	03/31/	<u>′00′</u>
Type or print name Cathy Rowan (This areas for State year)				Telephone No.	281-018-4733	
(This space for State use)					AND COLOR	
APPPROVED BY	7	TITLE			_DATE	
Conditions of approval, if any:					-	_

